

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Republican Party of Wisconsin

ADDRESS (number and street) ▼

148 East Johnson Street

☐ Check if different than previously reported. (ACC)

Madison

WI

53703

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00074450

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mike Jones

Signature of Treasurer

Mike Jones

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 09 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y  
 09 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		433731.94
(b) Cash on Hand at Beginning of Reporting Period.....	209949.81	
(c) Total Receipts (from Line 19) .....	230072.57	1541224.58
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	440022.38	1974956.52
7. Total Disbursements (from Line 31) .....	170444.52	1705378.66
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	269577.86	269577.86
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 09 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y  
 09 / 30 / 2015
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

91510.00

259355.75

(ii) Unitemized .....

45026.75

789502.25

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

136536.75

1048858.00

(b) Political Party Committees .....

34250.00

46450.00

(c) Other Political Committees

(such as PACs).....

3000.00

209868.26

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

173786.75

1305176.26

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

36600.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

7476.38

39848.61

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

48809.44

159599.71

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

48809.44

159599.71

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

230072.57

1541224.58

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

181263.13

1381624.87

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	27455.31	76181.09
(ii) Non-Federal Share.....	48809.46	135432.96
(b) Other Federal Operating Expenditures .....	41061.63	960402.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	117326.40	1172016.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	4480.00	4480.00
(c) Other Political Committees (such as PACs).....	0.00	2000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	4480.00	6480.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	48638.12	526882.22
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	48638.12	526882.22
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	170444.52	1705378.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	121635.06	1569945.70

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	173786.75	1305176.26
34. Total Contribution Refunds (from Line 28(d)) .....	4480.00	6480.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	169306.75	1298696.26
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	68516.94	1036583.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	7476.38	39848.61
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	61040.56	996734.87

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 116

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JOHN ANDERSON**

Mailing Address 330 SPRING CREEK ROAD

City	State	Zip Code
ROCKFORD	IL	61107-1035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

Transaction ID : SA11.985242

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. HERBERT ALAN LEVIN**

Mailing Address 724 E GRINNELL DRIVE

City	State	Zip Code
BURBANK	CA	91501-1720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

DOJ OF CA

LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

Transaction ID : SA11.985936

Amount of Each Receipt this Period

90.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. PHILIP E. RITCH**

Mailing Address 146 KALUAMOO STREET

City	State	Zip Code
KAILUA	HI	96734-2144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

Transaction ID : SA11.985938

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. STUART E. SCHLOUGH**

Mailing Address 1655 CONNORS ROAD

City  
MARSHALLState Zip Code  
WI 53559-9729FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

Transaction ID : SA11.985175

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. STEPHEN SQUIRES SR.**

Mailing Address 19900 128TH STREET LOT 226

City  
BRISTOLState Zip Code  
WI 53104-9418FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

Transaction ID : SA11.985223

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. ERICH ZILLER**

Mailing Address 224 W TAPAWINGO ROAD

City  
MISHICOTState Zip Code  
WI 54228-9720FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

Transaction ID : SA11.985184

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 116  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MARY FALL**

Mailing Address 4023 SUMMIT ROAD

City

ASHLAND

State

WI

Zip Code

54806-3544

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2015

Transaction ID : SA11.985347

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. WILLIAM B. MORMAN**

Mailing Address 111 HILLENDALE AVENUE

City

NAZARETH

State

PA

Zip Code

18064-9163

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2015

Transaction ID : SA11.985267

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MARGARET M. RENDALL**

Mailing Address 6710 BRAUN ROAD

City

MOUNT PLEASANT

State

WI

Zip Code

53403-9414

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2015

Transaction ID : SA11.985317

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 116

(check only one)

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. THOMAS J. CASSIDY**

Mailing Address 10200 WEST BLUEMOUND ROAD, APT 102

City	State	Zip Code
MILWAUKEE	WI	53226-4370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	03	/	2015

Transaction ID : SA11.985352

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. THOMAS E. VANDENBERG**

Mailing Address 1975 STONE SILO CIRCLE

City	State	Zip Code
DE PERE	WI	54115-3388

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SCHMEIDER NATIONAL

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	03	/	2015

Transaction ID : SA11.985415

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MRS. LUCILLE E. CADWELL**

Mailing Address 3000 W BELMONT ROAD

City	State	Zip Code
WAUSAU	WI	54401-8313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2015

Transaction ID : SA11.985788

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

1100.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. CLIFFORD CONRADT**

Mailing Address N5057 PULS ROAD

City  
SHIOCTONState  
WIZip Code  
54170-9058FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2015

Transaction ID : SA11.986508

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. HERBERT ALAN LEVIN**

Mailing Address 724 E GRINNELL DRIVE

City  
BURBANKState  
CAZip Code  
91501-1720FEC ID number of contributing  
federal political committee.

C

Name of Employer

DOJ OF CA

Occupation

LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2015

Transaction ID : SA11.986006

Amount of Each Receipt this Period

105.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. SANDRA R. MILLS**

Mailing Address 1500 RUE RAYNARD

City  
MENASHAState  
WIZip Code  
54952-2946FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2015

Transaction ID : SA11.985488

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5205.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. CHARLES F. REITZ**

Mailing Address 1220 EASTHILL DRIVE

City  
WAUSAUState  
WIZip Code  
54403-9223FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2015

Transaction ID : SA11.985487

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. GRACE SCHROEDER**

Mailing Address 344 FRENCH ROAD

City  
ONALASKAState  
WIZip Code  
54650-8646FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2015

Transaction ID : SA11.985996

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JOAN E. VOGES**

Mailing Address 11113 OBST ROAD

City  
RED BUDState  
ILZip Code  
62278-4225FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2015

Transaction ID : SA11.986523

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 116

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. WILLIAM C. CURRY SR.**

Mailing Address 2113 MONROE STREET

City

NEW HOLSTEIN

State

WI

Zip Code

53061-1103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

C.J. MEISELWITZ FURNITURE

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 08 / 2015

Transaction ID : SA11.985502

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. LEON T. WRIGHT**

Mailing Address 1006 SLATEWORTH DR.

City

DURHAM

State

NC

Zip Code

27703-6180

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST  
EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFF

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 08 / 2015

Transaction ID : SA11.985505

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. WILLIAM W. BUDGE**

Mailing Address 65 DOWNEY WAY

City

HILLSBOROUGH

State

CA

Zip Code

94010-6110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RANCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 09 / 2015

Transaction ID : SA11.986580

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 116  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MS. ALICE A. HANSON**

Mailing Address 948 HANSON DRIVE

City

RIVER FALLS

State

WI

Zip Code

54022-1564

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : SA11.985600

Amount of Each Receipt this Period

35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. RONALD KOLLMANSBERGER**

Mailing Address 1115 INSPIRATION LANE

City

ESCONDIDO

State

CA

Zip Code

92025-7928

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BOEING

Occupation

SENIOR MANAGER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : SA11.986573

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MICHAEL W. MACK**

Mailing Address 514 SHERMAN AVENUE E

City

FORT ATKINSON

State

WI

Zip Code

53538-1959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : SA11.986576

Amount of Each Receipt this Period

50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

285.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PATRICIA MOLLINO**

Mailing Address 515 N BAY AVENUE

City

MASSAPEQUA

State

NY

Zip Code

11758-2046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	5

Transaction ID : SA11.986548

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. EDWARD ORTON**

Mailing Address 2121 DICKINSON ROAD APT 9

City

DE PERE

State

WI

Zip Code

54115-1647

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	5

Transaction ID : SA11.986569

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JOE PUTNAM**

Mailing Address 55 MISSION TRAIL ROAD

City

WOODSIDE

State

CA

Zip Code

94062-3544

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AUTOMOTIVE DEALER

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	5

Transaction ID : SA11.985620

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

380.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 116

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. TRIG SOLBERG**

Mailing Address P.O. BOX 50

City

MINOCQUA

State

WI

Zip Code

54548-0050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

T.A. SOLBERG COMPANY, INC

Occupation

GROCCER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 09 / 2015

Transaction ID : SA11.986546

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. DAVID L. BAHL**

Mailing Address 2001 SOUTH PRAIRIE AVENUE

City

WAUKESHA

State

WI

Zip Code

53189-7307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WELDALL MANUFACTURING,

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 10 / 2015

Transaction ID : SA11.985623

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. SANDRA J. BRETH**

Mailing Address N2568 LEMKE DRIVE

City

ATHENS

State

WI

Zip Code

54411-9618

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BREAUE TANK

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

09 / 10 / 2015

Transaction ID : SA11.985625

Amount of Each Receipt this Period

110.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2110.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 116

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. STEVE MCGUIRE**

Mailing Address 2810 E MENLO BOULEVARD

City

MILWAUKEE

State

WI

Zip Code

53211-2652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US BANK

Occupation

BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 10 / 2015

Transaction ID : SA11.985836

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. PHILIP E. RITCH**

Mailing Address 146 KALUAMOO STREET

City

KAILUA

State

HI

Zip Code

96734-2144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

09 / 10 / 2015

Transaction ID : SA11.986007

Amount of Each Receipt this Period

35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. FRED M. YOUNG JR.**

Mailing Address 3201 MICHIGAN BOULEVARD

City

RACINE

State

WI

Zip Code

53402-3819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 10 / 2015

Transaction ID : SA11.985626

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10535.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. STEPHANIE SANDER**

Mailing Address 3948 N 96TH STREET

City

MILWAUKEE

State

WI

Zip Code

53222-2515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y		
0	9						1	1			2	0	1	5

Transaction ID : SA11.985654

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. KENNETH G. HELFRECHT**

Mailing Address 6205 MINERAL POINT ROAD APT 622

City

MADISON

State

WI

Zip Code

53705-4580

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y		
0	9						1	4			2	0	1	5

Transaction ID : SA11.985697

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. WILLIAM HOLLINGSWORTH**

Mailing Address 2010 PARKSIDE DR

City

JANESVILLE

State

WI

Zip Code

53548-6613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JANESVILLE PHYCHIATRIC CLINIC

Occupation

PSYCHOTHERAPIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y		
0	9						1	4			2	0	1	5

Transaction ID : SA11.985703

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JON S. MILLER**

Mailing Address 632 PRAIRIE HILLS DRIVE

City

DODGEVILLE

State

WI

Zip Code

53533-1674

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2015

Transaction ID : SA11.985685

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MS. CAROLE E. RULE**

Mailing Address 2375 SUNNY SLOPE ROAD

City

MINERAL POINT

State

WI

Zip Code

53565-9217

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2015

Transaction ID : SA11.985683

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. FOREST COUNTY POTAWATOMI COMMU**

Mailing Address PO 340

City

CRANDON

State

WI

Zip Code

54520-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2015

Transaction ID : SA11.987984

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MR. ROBERT A. GREENHECK**

Mailing Address 3810 STERNBERG AVENUE

City  
WESTONState  
WIZip Code  
54476-2658FEC ID number of contributing  
federal political committee.

C

Name of Employer

GREENHECK FAN CORP

Occupation

VICE-PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Transaction ID : SA11.985744

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. H FREDERICK HAUSLER**

Mailing Address 48072 KNOB LANE

City

WAUZEKA

State

WI

Zip Code

53826-8630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

FARM MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Transaction ID : SA11.985757

Amount of Each Receipt this Period

40.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. DAVID J. KLEINDL**

Mailing Address 1222 WEST CIRCLE DRIVE

City

BEAVER DAM

State

WI

Zip Code

53916-1208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Transaction ID : SA11.985742

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10090.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 116

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. GEORGE KOLOVOS**

Mailing Address 12424 WILSHIRE BOULEVARD STUIE 10

City State Zip Code  
 LOS ANGELES CA 90025-1071

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 15 2015

Transaction ID : SA11.985741

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. TIMOTHY S. MCCULLEY**

Mailing Address 51 OLD TRAIL ROAD

City State Zip Code  
 WATER MILL NY 11976-2013

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 15 2015

Transaction ID : SA11.985749

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. ROBERT W. ROECKER**

Mailing Address E6892 EAST REEDSBURG ROAD

City State Zip Code  
 REEDSBURG WI 53959-9705

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 15 2015

Transaction ID : SA11.985730

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. FRED ROETHLISBERGER**

Mailing Address W9920 710TH AVENUE

City

RIVER FALLS

State

WI

Zip Code

54022-4017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		1	5		2	0	1	5		

Transaction ID : SA11.985762

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. STEVEN M. CHORKAWY**

Mailing Address 1371 RUSSELL AVENUE

City

LINCOLN PARK

State

MI

Zip Code

48146-1626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		1	6		2	0	1	5		

Transaction ID : SA11.986381

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. J FRED DOORNBOS**

Mailing Address 1208 WYLDE GREEN ROAD

City

IOWA CITY

State

IA

Zip Code

52246-4834

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		1	6		2	0	1	5		

Transaction ID : SA11.986341

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 OF 116

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. MR. GENE H. RICE**

Mailing Address W6890 BRIDGE ROAD

City  
MONDOVI

State Zip Code  
WI 54755-8569

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 16 / 2015

Transaction ID : SA11.986367

Amount of Each Receipt this Period

30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. MR. HELMUT SAWALL**

Mailing Address 4585 SOMERSET LANE

City  
BROOKFIELD

State Zip Code  
WI 53045-8166

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

09 / 16 / 2015

Transaction ID : SA11.986359

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. MR. HELMUT SAWALL**

Mailing Address 4585 SOMERSET LANE

City  
BROOKFIELD

State Zip Code  
WI 53045-8166

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

09 / 16 / 2015

Transaction ID : SA11.986360

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

205.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 116

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BARBARA BUISKER**

Mailing Address 2875 MAPLE WOOD COURT

City

FITCHBURG

State

WI

Zip Code

53711-5184

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ACCU WEB

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2015

Transaction ID : SA11.986505

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. THOMAS J. CASSIDY**

Mailing Address 10200 WEST BLUEMOUND ROAD, APT 102

City

MILWAUKEE

State

WI

Zip Code

53226-4370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2015

Transaction ID : SA11.986410

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JAMES M. COPE**

Mailing Address N57W30614 STEVENS ROAD

City

HARTLAND

State

WI

Zip Code

53029-9378

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WALKER &amp; DUNLOP

Occupation

MORTGAGE BROKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 17 / 2015

Transaction ID : SA11.986475

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 24 OF 116  
 (check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. NORMA GUTIERREZ**

Mailing Address 3050 SANTA BARBARA DRIVE

 City State Zip Code  
 BROOKFIELD WI 53005-3715

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 09 17 2015

Transaction ID : SA11.986481

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. DAVID S. KENYON**

Mailing Address P.O. BOX 205

 City State Zip Code  
 OAKFIELD WI 53065-0205

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 09 17 2015

Transaction ID : SA11.986459

Amount of Each Receipt this Period

35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. RICHARDSON MCKINNEY**

Mailing Address 2572 TOUCHMARK COURT

 City State Zip Code  
 APPLETON WI 54914-8792

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 09 17 2015

Transaction ID : SA11.986447

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JUDITH G G. RUTKIEWICZ**

Mailing Address 3067 WEST THORNCREST DRIVE

City  
FRANKLINState  
WIZip Code  
53132-9114FEC ID number of contributing  
federal political committee.

C

Name of Employer

NA

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2015

Transaction ID : SA11.987987

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. STEPHANIE SANDER**

Mailing Address 3948 N 96TH STREET

City

MILWAUKEE

State

WI

Zip Code

53222-2515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2015

Transaction ID : SA11.986422

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JIM D. SCHNEIDER**

Mailing Address N24 W30382 CRYSTAL SPRINGS DRIVE

City

PEWAUKEE

State

WI

Zip Code

53072-4274

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LAKE COUNTRY MFG

Occupation

OWNER/PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2015

Transaction ID : SA11.986456

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. WALTER R. SCHWARTZ**

Mailing Address 8220 HARWOOD AVENUE # 338

City

WAUWATOSA

State

WI

Zip Code

53213-2580

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	5		

Transaction ID : SA11.986425

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. FRANCIS J. SZYMBORSKI**

Mailing Address 426 GROVE STREET

City

SULLIVAN

State

WI

Zip Code

53178-9770

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST  
EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	5		

Transaction ID : SA11.986416

Amount of Each Receipt this Period

40.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JACK W. BOETTCHER**

Mailing Address 13855 ELIZABETH COURT

City

NEW BERLIN

State

WI

Zip Code

53151-8021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	1	5		

Transaction ID : SA11.986645

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MR. WILLIAM O. BRACHMAN**

Mailing Address 10101 CEDAR CREEK ROAD

City	State	Zip Code
CEDARBURG	WI	53012-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2015

Transaction ID : SA11.988186

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MRS. LUCILLE E. CADWELL**

Mailing Address 3000 W BELMONT ROAD

City	State	Zip Code
WAUSAU	WI	54401-8313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2015

Transaction ID : SA11.988189

Amount of Each Receipt this Period

35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. KEITH J. NIEMUTH**

Mailing Address 540 SILVERWOOD LN

City	State	Zip Code
NEENAH	WI	54956-1940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2015

Transaction ID : SA11.986632

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 OF 116

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. ROBERT PETERSON**

Mailing Address 4173 S SONATA CIRCLE

City

MILWAUKEE

State

WI

Zip Code

53221-1974

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 18 / 2015

Transaction ID : SA11.988178

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. JAMES SCHEUERELL**

Mailing Address 9040 FAIRVIEW AVENUE

City

SOUTH MILWAUKEE

State

WI

Zip Code

53172-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 18 / 2015

Transaction ID : SA11.988170

Amount of Each Receipt this Period

225.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. MR. RICHARD R. SELJE**

Mailing Address 4442 ROCKINGHAM DRIVE

City

JANESVILLE

State

WI

Zip Code

53546-3317

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

09 / 18 / 2015

Transaction ID : SA11.988181

Amount of Each Receipt this Period

25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

310.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 116

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MS. CORA R. SHIFFER**

Mailing Address 3304 14TH STREET  
APT 212

City State Zip Code  
EAU CLAIRE WI 54703-2699

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 18 / 2015

Transaction ID : SA11.986607

Amount of Each Receipt this Period

45.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. ROBERT SPIVEY**

Mailing Address 1660 HOFFMAN ROAD

City State Zip Code  
GREEN BAY WI 54311-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 18 / 2015

Transaction ID : SA11.988187

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR KENNETH SWEET**

Mailing Address 4045 S 54TH STREET

City State Zip Code  
MILWAUKEE WI 53220-2613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

09 / 18 / 2015

Transaction ID : SA11.986656

Amount of Each Receipt this Period

60.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

155.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 OF 116

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. BARBARA FINN**

Mailing Address 61 KINGS CT. APT 11W

City  
SAN JUAN

State  
PR

Zip Code  
00911-1663

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 21 / 2015

Transaction ID : SA11.986747

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. HELENE HOULE**

Mailing Address 59 W 4TH ST.

City  
ST PAUL

State  
MN

Zip Code  
55102-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 21 / 2015

Transaction ID : SA11.987988

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. ERIC HOVDE**

Mailing Address 122 W WASHINGTON AVENUE  
SUITE 350

City  
MADISON

State  
WI

Zip Code  
53703-2758

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOVDE PROPERTIES

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

09 / 21 / 2015

Transaction ID : SA11.986767

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 OF 116

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. MR. JAMES POPP**

Mailing Address 1046 S MAIN STREET

City  
SHAWANO

State Zip Code  
WI 54166-3351

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

09 / 21 / 2015

Transaction ID : SA11.986715

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. MRS. MARION J. ADLER**

Mailing Address 10200 W BLUEMOUND ROAD  
APT 807

City  
WAUWATOSA

State Zip Code  
WI 53226-4358

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

09 / 22 / 2015

Transaction ID : SA11.986790

Amount of Each Receipt this Period

30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. CHARLES B. ARRINGTON JR.**

Mailing Address 800 SAINT CHRISTOPHERS ROAD

City  
RICHMOND

State Zip Code  
VA 23226-2711

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

09 / 22 / 2015

Transaction ID : SA11.986840

Amount of Each Receipt this Period

110.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

190.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. HARRY DAHL**

Mailing Address 25121 MALLARD ROAD

City  
SPARTAState  
WIZip Code  
54656-3705FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DAHL AUTOMOTIVEOccupation  
AUTO DEALER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : SA11.986863

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. DONALD DIEKMAN**

Mailing Address P.O. BOX 376

City  
EPHRAIMState  
WIZip Code  
54211-0376FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : SA11.986811

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. CHARLES GELATT**

Mailing Address 3159 EDGEWATER DRIVE

City  
LA CROSSEState  
WIZip Code  
54603-1090FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTHERN MICROGRAPHICS CORPORATICOccupation  
MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : SA11.986910

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2950.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. THOMAS GOULD**

Mailing Address 10248 N WESTPORT CIRCLE

City  
MEQUONState  
WIZip Code  
53092-5739FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : SA11.986871

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. HERBERT ALAN LEVIN**

Mailing Address 724 E GRINNELL DRIVE

City  
BURBANKState  
CAZip Code  
91501-1720FEC ID number of contributing  
federal political committee.

C

Name of Employer

DOJ OF CA

Occupation

LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : SA11.988195

Amount of Each Receipt this Period

90.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. ELIZABETH ROLFS**

Mailing Address 5346 N HOLLYWOOD AVENUE

City  
MILWAUKEEState  
WIZip Code  
53217-5323FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : SA11.986903

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

390.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 116

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. CHARLES L. SCHROEDER

Mailing Address 1973 BATCHELDER COURT

City

EL CAJON

State

CA

Zip Code

92020-2801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2015

Transaction ID : SA11.986831

Amount of Each Receipt this Period

220.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. STEPHEN SQUIRES SR.

Mailing Address 19900 128TH STREET LOT 226

City

BRISTOL

State

WI

Zip Code

53104-9418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2015

Transaction ID : SA11.986876

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. D W. TORGERSON

Mailing Address 1312 WISCONSIN STREET APT 229

City

HUDSON

State

WI

Zip Code

54016-1850

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2015

Transaction ID : SA11.986771

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

420.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 116

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

### A. RICHARD VOELL

Mailing Address 13611 DEERING BAY DRIVE APT 1101

City State Zip Code  
CORAL GABLES FL 33158-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

09 / 22 / 2015

Transaction ID : SA11.988196

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

### B. WALTER G. WARTOLEC

Mailing Address 927 CORNELL COURT

City State Zip Code  
MADISON WI 53705-2241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

09 / 22 / 2015

Transaction ID : SA11.986883

Amount of Each Receipt this Period

30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

### C. RONALD KOLLMANSBERGER

Mailing Address 1115 INSPIRATION LANE

City State Zip Code  
ESCONDIDO CA 92025-7928

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BOEING

Occupation

SENIOR MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 23 / 2015

Transaction ID : SA11.986920

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

330.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JOHN C. MCCRILLIS**

Mailing Address P.O. BOX 458

City  
NEWPORTState  
NHZip Code  
03773-0458FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	5

Transaction ID : SA11.986921

Amount of Each Receipt this Period

95.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. JACK PEASE**

Mailing Address 326 CALLE LA MONTANA

City  
MORAGAState  
CAZip Code  
94556-1612FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	5

Transaction ID : SA11.986918

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. RAYMOND N FINK**

Mailing Address P.O. BOX 134

City  
WILLIAMSTONState  
MIZip Code  
48895-0134FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	5

Transaction ID : SA11.988033

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

295.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. FRED D. PANZER**

Mailing Address W6375 FIRELANE 8

City  
MENASHAState  
WIZip Code  
54952-9746FEC ID number of contributing  
federal political committee.

C

Name of Employer

RADIOLOGY ASSOCIATION OF APPLETON

Occupation

M.D.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	5		

Transaction ID : SA11.986944

Amount of Each Receipt this Period

400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. LENORA H PUSTA**

Mailing Address 138 W SUNFLOWER DR.

City  
PAYSONState  
AZZip Code  
85541-FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	5		

Transaction ID : SA11.988007

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. LORRAINE M RATAJECK**

Mailing Address 225 SAINT PAULS AVENUE

City  
JERSEY CITYState  
NJZip Code  
07306-3709FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	5		

Transaction ID : SA11.988021

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

650.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 116

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. KONYA SCHUH**

Mailing Address 2365 N PARKER DRIVE

City  
JANESVILLEState Zip Code  
WI 53545-0715FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HENDRICKS COMMERCIAL PROPERTISOccupation  
REAL ESTATE MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	5		

Transaction ID : SA11.986929

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. ALEXANDER SEYFARTH**

Mailing Address 5576 W RIVER OAKS ROAD

City  
JANESVILLEState Zip Code  
WI 53545-8971FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRODUCT MANAGEROccupation  
BANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	5		

Transaction ID : SA11.986963

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JAMES E. SPEAKER**

Mailing Address 4529 COLUMBIA RD

City  
CEDARBURGState Zip Code  
WI 53012-9185FEC ID number of contributing  
federal political committee.

C

Name of Employer  
J W SPEAKER CORPORATIONOccupation  
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	5		

Transaction ID : SA11.986941

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 116  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. YVONNE R BERRY**

Mailing Address 1019 VAN SICLEN AVE APT 5J

City State Zip Code  
 BROOKLYN NY 11207-9035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 25 / 2015

Transaction ID : SA11.988039

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. GINNY CURRY**

Mailing Address 2113 MONROE STREET

City State Zip Code  
 NEW HOLSTEIN WI 53061-1103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW HOLSTEIN SCHOOL DISTRICT

Occupation

LANGUAGE ARTS INSTRUCTIR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 25 / 2015

Transaction ID : SA11.986980

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. GARY GORALSKI**

Mailing Address 2929 S 69TH STREET

City State Zip Code  
 MILWAUKEE WI 53219-2916

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 25 / 2015

Transaction ID : SA11.987011

Amount of Each Receipt this Period

50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. STANLEY HUBBARD**

Mailing Address 3415 UNIVERSITY AVENUE

City  
SAINT PAULState  
MNZip Code  
55114-1019FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HUBBARD BROADCASTING, INCOccupation  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	1	5		

Transaction ID : SA11.987012

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. JAMES N. JOHNSON**Mailing Address 351 W WILSON ST  
UNIT 5City  
MADISONState  
WIZip Code  
53703-3394FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	1	5		

Transaction ID : SA11.986977

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. RICHARD C. MARX**

Mailing Address P.O. BOX 440

City  
WAPPINGERS FALLSState  
NYZip Code  
12590-0440FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	1	5		

Transaction ID : SA11.986985

Amount of Each Receipt this Period

105.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10155.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PRUDENCE M MILLER**

Mailing Address 4220 SW GREENLEAF DR.

City  
PORTLANDState  
ORZip Code  
97221-FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9						2	5				

Transaction ID : SA11.988055

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. LORRAINE M RATAJECK**

Mailing Address 225 SAINT PAULS AVENUE

City  
JERSEY CITYState  
NJZip Code  
07306-3709FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9						2	5				

Transaction ID : SA11.988061

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MARK SCHROEDER**

Mailing Address 513 WASHINGTON STREET

City  
ATHENSState  
WIZip Code  
54411-9757FEC ID number of contributing  
federal political committee.

C

Name of Employer

SCHOOL DISTRICT OF ATHENS

Occupation

MUSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9						2	5				

Transaction ID : SA11.987007

Amount of Each Receipt this Period

40.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

790.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 116

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MR. ROBERT C BROWN JR.**

Mailing Address P.O. BOX 756

City  
OSCEOLA

State Zip Code  
WI 54020-0756

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 28 / 2015

Transaction ID : SA11.988072

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. JANE A. FOSTER**

Mailing Address 421 SQUAM LAKE ROAD

City  
CENTER SANDWICH

State Zip Code  
NH 03227-3228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 28 / 2015

Transaction ID : SA11.988093

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MH JENKINS**

Mailing Address P.O. BOX 343

City  
GRAYSON

State Zip Code  
LA 71435-0343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

09 / 28 / 2015

Transaction ID : SA11.988100

Amount of Each Receipt this Period

25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

275.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 43 OF 116  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. DONALD L L. LJUNGREN

Mailing Address 945 CENTURY AVE SE APT 214

City

HUTCHINSON

State

MN

Zip Code

55350-3792

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2015

Transaction ID : SA11.988126

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. DAVID J PRICE

Mailing Address 14350 HUMMINGBIRD ST NW

City

ANDOVER

State

MN

Zip Code

55304-5846

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2015

Transaction ID : SA11.988085

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. LAURA B RICHARDS

Mailing Address 102 BOULDER RD

City

MANHASSET

State

NY

Zip Code

11030-1632

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2015

Transaction ID : SA11.988103

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 44 OF 116

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. HELEN E E. SHANKS**

Mailing Address 3378 S OLD STATE ROAD 15

City

WABASH

State

IN

Zip Code

46992-7979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8		2	0	1	5		

Transaction ID : SA11.988082

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. GERALD R. SWANSON**

Mailing Address P.O. BOX 369

City

MEDINA

State

WA

Zip Code

98039-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8		2	0	1	5		

Transaction ID : SA11.988086

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MICHAEL D TYRHOLM**

Mailing Address 3510 COLLIER LN

City

KLAMATH FALLS

State

OR

Zip Code

97603-9643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8		2	0	1	5		

Transaction ID : SA11.988069

Amount of Each Receipt this Period

75.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

275.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 OF 116

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. VIRGINIA G WITTMER**

Mailing Address 10863 WILLFLEET DR.

City State Zip Code  
CINCINNATTI OH 45241-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 28 / 2015

Transaction ID : SA11.988104

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. WALTER H. CLAIBORNE III**

Mailing Address 14217 CLAIBORNE ROAD

City State Zip Code  
BATCHELOR LA 70715-3514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 29 / 2015

Transaction ID : SA11.987083

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. DENNIS DEMASTER**

Mailing Address 314 EMILY LN

City State Zip Code  
BEAVER DAM WI 53916-1990

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 29 / 2015

Transaction ID : SA11.988144

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 116

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. G FREDERICK KASTEN JR.

Mailing Address 160 LOGGER HEAD POINT

City

VERO BEACH

State

FL

Zip Code

32963-4405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2015

Transaction ID : SA11.987055

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. DAVID VOGEL UIHLEIN JR.

Mailing Address 8265 NORTH RIVER ROAD

City

MILWAUKEE

State

WI

Zip Code

53217-2546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UILEIN/WILSON ARCHITECTS

Occupation

EXECUTIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2015

Transaction ID : SA11.987071

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. LUCIA B. WILSON

Mailing Address 695 N BROOKFIELD RD  
APT 222

City

BROOKFIELD

State

WI

Zip Code

53045-5849

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2015

Transaction ID : SA11.987077

Amount of Each Receipt this Period

350.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

15350.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 OF 116

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MR. ERICH ZILLER**

Mailing Address 224 W TAPAWINGO ROAD

City  
MISHICOT

State Zip Code  
WI 54228-9720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 29 / 2015

Transaction ID : SA11.987074

Amount of Each Receipt this Period

60.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

91510.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 116

<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. NRSC**

Mailing Address 425 2ND ST NE

City

State

Zip Code

D.C.

DC

20002-4914

FEC ID number of contributing  
federal political committee.

C C00027466

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	1		2	0	1	5

Transaction ID : SA11.985245

Amount of Each Receipt this Period

5500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 1ST ST SE

City

State

Zip Code

WASHINGTON

DC

20003-1885

FEC ID number of contributing  
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

77550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	1		2	0	1	5

Transaction ID : SA11.987985

Amount of Each Receipt this Period

28750.00

TRANSFER

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

34250.00

34250.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 116

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. GENERAL MOTORS PAC**

Mailing Address 1660 L SUITE, NW SUITE 400

City  
WASHINGTON

State Zip Code  
DC 20036-5603

FEC ID number of contributing  
federal political committee.

C C00076810

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 14 2015

Transaction ID : SA11.987982

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. THRIVENT FINANCIAL FOR LUTHERANS EMPLOYEE PAC**

Mailing Address POST OFFICE BOX 1892

City  
APPLETON

State Zip Code  
WI 54912-1892

FEC ID number of contributing  
federal political committee.

C C00121319

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 14 2015

Transaction ID : SA11.987983

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00

3000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 50 OF 116

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	--	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. RON JOHNSON FOR US SENATE**Mailing Address 219 E WASHINGTON  
STE 101

City OSHKOSH State WI Zip Code 54901-5029

FEC ID number of contributing  
federal political committee.

C C00482984

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

21319.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 17 / 2015

Transaction ID : SA11.987981

Amount of Each Receipt this Period

7476.38

OFFICE RENT

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7476.38

7476.38

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

### A. PIRYX

Category/  
Type

1.40

State:  District:

**B. HEINZEN PRINTING INC.**

09 / 02 / 2015

Category/  
Type

849.28

State:  District:

### C. MAJORITY STRATEGIES

Category/  
Type

2450.00

State:  District:

3300.68

\_\_\_\_\_



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 116

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address P.O. BOX 3052

City MILWAUKEE      State WI      Zip Code 53201

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2015

Transaction ID : SB21B.I22455

Amount of Each Disbursement this Period

2747.42

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address

1593 SPRING HILL ROAD

City TYSONS CORNER      State VA      Zip Code 22182

Purpose of Disbursement  
SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 20 / 2015

Transaction ID : SB21B.I22572

Amount of Each Disbursement this Period

902.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. DOMAIN/HOSTING SERVICES**Mailing Address 14455 N HAYDEN ROAD  
SUITE 219

City SCOTTSDALE      State AZ      Zip Code 85260

Purpose of Disbursement  
DOMAIN HOSTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2015

Transaction ID : SB21B.I22571

Amount of Each Disbursement this Period

6.99

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2747.42



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 116

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. FACEBOOK**

Mailing Address 1 HACKER WAY

City MENLO PARK      State CA      Zip Code 94025

Purpose of Disbursement  
ADVERTISING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      08      2015

Transaction ID : SB21B.I22584

Amount of Each Disbursement this Period

250.01

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. GODADDY.COM**

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE      State AZ      Zip Code 85260

Purpose of Disbursement  
DOMAIN HOSTING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      01      2015

Transaction ID : SB21B.I22577

Amount of Each Disbursement this Period

8.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HOTELS.COM**

Mailing Address 10440 N CENTRAL EXPRESSWAY

City DALLAS      State TX      Zip Code 75231

Purpose of Disbursement  
REVERSED CHARGE FOR STAFF LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      13      2015

Transaction ID : SB21B.I22570

Amount of Each Disbursement this Period

-1290.52

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00





<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

### A. UNITED AIRLINES

Mailing Address 3600 PRESIDENTIAL BOULEVARD

City	State	Zip Code
AUSTIN	TX	78719

### Purpose of Disbursement

#### STAFF TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.I22582

Amount of Each Disbursement this Period

327.10

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## B. ISTREAM

Mailing Address 13555 BISHOPS CT, STE 102

City	State	Zip Code
BROOKFIELD	WI	53005

Purpose of Disbursement	CHECK PROCESSING FEE
-------------------------	----------------------

Candidate Name	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
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9	9
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97	97
98	98
99	99
100	100

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.I22454

Amount of Each Disbursement this Period

231.05

Full Name (Last, First, Middle Initial)

### C. PIRYX

Mailing Address 85 NATOMA STREET

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement	CREDIT CARD PROCESSING FEE
-------------------------	----------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.I22460

Amount of Each Disbursement this Period

2.19

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

233.24

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 116

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. WISC DEPT OF REVENUE - SLS TX**

Mailing Address P.O. BOX 930208

City MILWAUKEE      State WI      Zip Code 53293

Purpose of Disbursement  
SALES/USE TAX

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2015

Transaction ID : SB21B.I22482

Amount of Each Disbursement this Period

1134.61

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address P.O. BOX 981540

City EL PASO      State TX      Zip Code 79998

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 08 / 2015

Transaction ID : SB21B.I22461

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

**C. AMERICAN LIBERTY GROUP**

Mailing Address 611 PENNSYLVANIA AVENUE SE

City WASHINGTON      State DC      Zip Code 20003

Purpose of Disbursement  
FUNDRAISING - NOT FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 08 / 2015

Transaction ID : SB21B.I22486

Amount of Each Disbursement this Period

1725.00

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2867.56

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 116

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. CLEAR CHANNEL OUTDOOR WI**

Mailing Address 908 SILVERNAIL ROAD

City PEWAUKEE      State WI      Zip Code 53072

Purpose of Disbursement  
ADVERTISING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB21B.I22451

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO      State CA      Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2015

Transaction ID : SB21B.I22462

Amount of Each Disbursement this Period

1.00

Full Name (Last, First, Middle Initial)

**C. BANCARD/FIS MERCHANT SERVICES**

Mailing Address 11000 W LAKE PARK DRIVE

City MILWAUKEE      State WI      Zip Code 53224

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 10 / 2015

Transaction ID : SB21B.I22463

Amount of Each Disbursement this Period

259.66

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

960.66

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

**A. SOUTHWEST PUBLISHING & MAILING CORP**

Date of Disbursement



Transaction ID : SB21B.I22476

Amount of Each Disbursement this Period

989.88

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

### B. STEVE BROWN DM

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.I22477

Amount of Each Disbursement this Period

1367.85

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

### C. BMO HARRIS BANK

Date of Disbursement

Three digital displays are shown, each with a different number of segments missing (indicated by grey squares). The first display shows '09' with 2 missing segments. The second display shows '11' with 2 missing segments. The third display shows '2015' with 4 missing segments.

Transaction ID : SB21B.I22452

Amount of Each Disbursement this Period

158.81

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

2516.54

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 116

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE    State WI    Zip Code 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB21B.I22453

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO    State CA    Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 11 / 2015

Transaction ID : SB21B.I22464

Amount of Each Disbursement this Period

0.60

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address P.O. BOX 981540

City EL PASO    State TX    Zip Code 79998

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 14 / 2015

Transaction ID : SB21B.I22465

Amount of Each Disbursement this Period

20.81

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

33.41



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 116

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address P.O. BOX 3052

City MILWAUKEE      State WI      Zip Code 53201

Purpose of Disbursement  
CREDIT CARD FEE

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For:  
☐ Primary      ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      27      2015

Transaction ID : SB21B.I22585

Amount of Each Disbursement this Period

19.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO      State CA      Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For:  
☐ Primary      ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      17      2015

Transaction ID : SB21B.I22467

Amount of Each Disbursement this Period

4.00

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO      State CA      Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:   ☐ House  
                          ☐ Senate  
                          ☐ President

State:      District:

Disbursement For:  
☐ Primary      ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09      21      2015

Transaction ID : SB21B.I22468

Amount of Each Disbursement this Period

43.40

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

47.40

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 116

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. WISC DEPT OF REVENUE - SLS TX**

Mailing Address P.O. BOX 930208

City MILWAUKEE      State WI      Zip Code 53293

Purpose of Disbursement  
SALES/USE TAX

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 21 / 2015

Transaction ID : SB21B.I22483

Amount of Each Disbursement this Period

1074.08

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO      State CA      Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2015

Transaction ID : SB21B.I22469

Amount of Each Disbursement this Period

2.00

Full Name (Last, First, Middle Initial)

**C. FED EX**

Mailing Address P.O. BOX 94515

City PALATINE      State IL      Zip Code 60094

Purpose of Disbursement  
POSTAGE EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2015

Transaction ID : SB21B.I22480

Amount of Each Disbursement this Period

209.08

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1285.16



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 116

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 23 2015

Transaction ID : SB21B.I22470

Amount of Each Disbursement this Period

1.00

Full Name (Last, First, Middle Initial)

**B. CLOCKWORK SYSTEMS**

Mailing Address 6001 GLOSTER ROAD

City State Zip Code  
BETHESDA MD 20816
Purpose of Disbursement  
DIRECT MAIL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 24 2015

Transaction ID : SB21B.I22489

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 24 2015

Transaction ID : SB21B.I22471

Amount of Each Disbursement this Period

52.80

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

503.80

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

**A. SOUTHWEST PUBLISHING & MAILING CORP**

Date of Disbursement



Transaction ID : SB21B.I22478

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

8624.19

### B. STEVE BROWN DM

Date of Disbursement

09 / 24 / 2015

Transaction ID : SB21B.I22479

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

4527.38

### C. PIRYX

Date of Disbursement

M M / D D / Y Y Y Y  
09 25 2015

Transaction ID : SB21B.I22472

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

64.20

13215.77

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

**A. VILLAGE GRAPHICS PRINTING, LLC**

Mailing Address 108 W CAPITOL DRIVE

City	State	Zip Code
HARTLAND	WI	53029

Purpose of Disbursement  
PRINTING - NOT FEA

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement



Transaction ID : SB21B.I22490

Amount of Each Disbursement this Period

387.59

Full Name (Last, First, Middle Initial)

## B. PIRYX

Mailing Address 85 NATOMA STREET

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement	CREDIT CARD PROCESSING FEE
-------------------------	----------------------------

Candidate Name	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.I22473

Amount of Each Disbursement this Period

139.00

Full Name (Last, First, Middle Initial)

### C. PIRYX

Mailing Address 85 NATOMA STREET

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement	CREDIT CARD PROCESSING FEE
-------------------------	----------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

09 / 29 / 2015

Transaction ID : SB21B.I22474

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

535.59

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 116

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 30 2015

Transaction ID : SB21B.I22475

Amount of Each Disbursement this Period

6.40

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6.40

41031.63

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. Republican Party of Wisconsin - State Account**

Mailing Address 148 E Johnson Street

City	State	Zip Code
Madison	WI	53703

Purpose of Disbursement  
TRANSFER OUT TO CORRECT H3

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2015

Transaction ID : MCW091815MW

Amount of Each Disbursement this Period

4480.00
---------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4480.00
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4480.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I22533

Purpose of Disbursement  
PAYROLL TAX

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

0.02
------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. ASSURANT EMPLOYEE BENEFITS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2015

Mailing Address P.O. BOX 807009

City	State	Zip Code
KANSAS CITY	MO	64184

Transaction ID : SB30B.I22531

Purpose of Disbursement  
EMPLOYEE BENEFITS

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

231.06
--------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. DELTA DENTAL**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2015

Mailing Address P.O. BOX 828

City	State	Zip Code
STEVENS POINT	WI	54481

Transaction ID : SB30B.I22532

Purpose of Disbursement  
DENTAL INSURANCE

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

508.48
--------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

739.56
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MICHAEL DUFFEY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2015

Mailing Address 726 WINDSOR COURT

City	State	Zip Code
WAUWATOSA	WI	53226

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Category/  
Type

Transaction ID : SB30B.I22519

Amount of Each Disbursement this Period

1050.98
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. COURTYARD MARRIOTT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2015

Mailing Address 2021 CORNELL ROAD

City	State	Zip Code
CLEVELAND	OH	44106

Purpose of Disbursement  
STAFF LODGING

Candidate Name

Category/  
Type

Transaction ID : SB30B.I22555

Amount of Each Disbursement this Period

248.44
--------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. HOLIDAY INN**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2015

Mailing Address 2785 RAMADA WAY

City	State	Zip Code
GREEN BAY	WI	54304

Purpose of Disbursement  
STAFF LODGING

Candidate Name

Category/  
Type

Transaction ID : SB30B.I22556

Amount of Each Disbursement this Period

486.98
--------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.98
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 72 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MICHAEL DUFFEY**

Mailing Address 726 WINDSOR COURT

City	State	Zip Code
WAUWATOSA	WI	53226

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : SB30B.I22520

Amount of Each Disbursement this Period

96.08
-------

Full Name (Last, First, Middle Initial)

**B. AMERICAN FUNDS SERVICE COMPANY**

Mailing Address BOX 6164

City	State	Zip Code
INDIANAPOLIS	IN	46206-6164

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2015

Transaction ID : SB30B.I22547

Amount of Each Disbursement this Period

373.35
--------

Full Name (Last, First, Middle Initial)

**C. COLE ALTMAN**

Mailing Address 159 REMO PLACE

City	State	Zip Code
WEST PALM BEACH	FL	33418

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Transaction ID : SB30B.I22502

Amount of Each Disbursement this Period

15.69
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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

485.12
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 73 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. RICHARD DICKIE**

Mailing Address 126 N. BLAIR ST. #1

City MADISON	State WI	Zip Code 53703
-----------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2015

Transaction ID : SB30B.I22527

Amount of Each Disbursement this Period

1209.46
---------

Full Name (Last, First, Middle Initial)

**B. MICHAEL DUFFEY**

Mailing Address 726 WINDSOR COURT

City WAUWATOSA	State WI	Zip Code 53226
-------------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2015

Transaction ID : SB30B.I22521

Amount of Each Disbursement this Period

1684.33
---------

Full Name (Last, First, Middle Initial)

**C. JOHN FOSTER**

Mailing Address 2416 E WASHINGTON AVENUE

City MADISON	State WI	Zip Code 53704
-----------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2015

Transaction ID : SB30B.I22511

Amount of Each Disbursement this Period

689.81
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3583.60
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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

Republican Party of Wisconsin

### A. PATRICK GEHL

City	State	Zip Code
JANESVILLE	WI	53545

Transaction ID : SB30B.I22523

944.70

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

## B. PATRICK GEHL

09 / 15 / 2015

City	State	Zip Code
JANESVILLE	WI	53545

Transaction ID : SB30B.I22524

Age Group	Percentage
18-24	10.00
25-34	10.00
35-44	10.00
45-54	10.00
55-64	10.00
65-74	10.00
75-84	10.00
85+	48.90

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

### C. MILEAGE

City	State	Zip Code
------	-------	----------

Transaction ID : SB30B.I22566


Age Group	Percentage
18-24	~10%
25-34	48.90%
35-44	~15%
45-54	~10%
55-64	~5%
65-74	~2%
75-84	~1%
85+	~1%

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

993.60

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MARTHA GRAVLEE**

Mailing Address 2907 BIG TIMBER CIRCLE

City	State	Zip Code
SUAMICO	WI	54313

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2015

Transaction ID : SB30B.I22517

Amount of Each Disbursement this Period

1315.48
---------

Full Name (Last, First, Middle Initial)

**B. BENJAMIN HEATH**

Mailing Address 514 E WASHINGTON AVENUE

City	State	Zip Code
MADISON	WI	53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2015

Transaction ID : SB30B.I22495

Amount of Each Disbursement this Period

1263.64
---------

Full Name (Last, First, Middle Initial)

**C. DONNA HEIMBACH**

Mailing Address 3002 DIANNE DRIVE

City	State	Zip Code
MIDDLETON	WI	53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2015

Transaction ID : SB30B.I22504

Amount of Each Disbursement this Period

500.59
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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3079.71
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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

Republican Party of Wisconsin

### A. CHRISTOPHER MARTIN

Category/  
Type

1530.64

State:  District:

## B. SCOTT POOLE

09 / 15 / 2015

Category/  
Type

101.58

State:  District:

### C. JASON RECTOR

Category/  
Type

1236.69

State:  District:

2868.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City	State	Zip Code
MAYLENE	AL	35114

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2015

Transaction ID : SB30B.I22506

Amount of Each Disbursement this Period

1315.48
---------

Full Name (Last, First, Middle Initial)

**B. CARL STOLTE**

Mailing Address 3519 ROMA LANE

City	State	Zip Code
MIDDLETON	WI	53562

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2015

Transaction ID : SB30B.I22497

Amount of Each Disbursement this Period

196.90
--------

Full Name (Last, First, Middle Initial)

**C. JOSHUA WILSON**

Mailing Address 641 W. MAIN STREET

City	State	Zip Code
MADISON	WI	53703

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2015

Transaction ID : SB30B.I22513

Amount of Each Disbursement this Period

348.35
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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1860.73
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 79 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I22534

Purpose of Disbursement  
PAYROLL TAX

Amount of Each Disbursement this Period

Candidate Name

  
Category/  
Type

6760.61
---------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I22535

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Amount of Each Disbursement this Period

Candidate Name

  
Category/  
Type

33.74
-------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I22536

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Amount of Each Disbursement this Period

Candidate Name

  
Category/  
Type

10.83
-------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6805.18
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 80 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I22537

Purpose of Disbursement  
PAYROLL TAX

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

75.06
-------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I22538

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

79.00
-------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. AMERICAN FUNDS SERVICE COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2015

Mailing Address BOX 6164

City	State	Zip Code
INDIANAPOLIS	IN	46206-6164

Transaction ID : SB30B.I22539

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1789.43
---------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1943.49
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 81 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. DEAN CARE**

Mailing Address P.O. BOX 673111

City  
CHICAGOState  
ILZip Code  
60695Purpose of Disbursement  
HEALTH INSURANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2015

Transaction ID : SB30B.I22540

Amount of Each Disbursement this Period

2426.81
---------

Full Name (Last, First, Middle Initial)

**B. DELTA DENTAL**

Mailing Address P.O. BOX 828

City  
STEVENS POINTState  
WIZip Code  
54481Purpose of Disbursement  
DENTAL INSURANCE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2015

Transaction ID : SB30B.I22541

Amount of Each Disbursement this Period

273.98
--------

Full Name (Last, First, Middle Initial)

**C. COLE ALTMAN**

Mailing Address 159 REMO PLACE

City  
WEST PALM BEACHState  
FLZip Code  
33418Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SB30B.I22503

Amount of Each Disbursement this Period

5.43
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2706.22
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 82 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. RICHARD DICKIE**

Mailing Address 126 N. BLAIR ST. #1

City MADISON	State WI	Zip Code 53703
-----------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB30B.I22528

Amount of Each Disbursement this Period

1191.30
---------

Full Name (Last, First, Middle Initial)

**B. MICHAEL DUFFEY**

Mailing Address 726 WINDSOR COURT

City WAUWATOSA	State WI	Zip Code 53226
-------------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB30B.I22522

Amount of Each Disbursement this Period

3161.25
---------

Full Name (Last, First, Middle Initial)

**C. JOHN FOSTER**

Mailing Address 2416 E WASHINGTON AVENUE

City MADISON	State WI	Zip Code 53704
-----------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB30B.I22512

Amount of Each Disbursement this Period

739.28
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5091.83
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 83 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PATRICK GEHL**

Mailing Address 1179 COLUMBUS CIRCLE

City  
JANESVILLEState  
WIZip Code  
53545Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SB30B.I22525

Amount of Each Disbursement this Period

5.25
------

Full Name (Last, First, Middle Initial)

**B. PATRICK GEHL**

Mailing Address 1179 COLUMBUS CIRCLE

City  
JANESVILLEState  
WIZip Code  
53545Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SB30B.I22526

Amount of Each Disbursement this Period

944.69
--------

Full Name (Last, First, Middle Initial)

**C. MARTHA GRAVLEE**

Mailing Address 2907 BIG TIMBER CIRCLE

City  
SUAMICOState  
WIZip Code  
54313Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SB30B.I22518

Amount of Each Disbursement this Period

1315.48
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2265.42
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 84 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BENJAMIN HEATH**

Mailing Address 514 E WASHINGTON AVENUE

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SB30B.I22496

Amount of Each Disbursement this Period

1263.66
---------

Full Name (Last, First, Middle Initial)

**B. DONNA HEIMBACH**

Mailing Address 3002 DIANNE DRIVE

City  
MIDDLETONState  
WIZip Code  
53562Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SB30B.I22505

Amount of Each Disbursement this Period

685.31
--------

Full Name (Last, First, Middle Initial)

**C. ANNA LEONE**

Mailing Address 801 W JOHNSON STREET

City  
MADISONState  
WIZip Code  
53706Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SB30B.I22494

Amount of Each Disbursement this Period

190.20
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2139.17
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 85 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. LARRY LOOMIS**

Mailing Address 762 BRIAR LN

City	State	Zip Code
BELOIT	WI	53511

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB30B.I22516

Amount of Each Disbursement this Period

389.75
--------

Full Name (Last, First, Middle Initial)

**B. ALEXANDER MANDRY**

Mailing Address 513 LEWIS STREET

City	State	Zip Code
BURLINGTON	WI	53105

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB30B.I22492

Amount of Each Disbursement this Period

13.66
-------

Full Name (Last, First, Middle Initial)

**C. CHRISTOPHER MARTIN**

Mailing Address 100 CORRINA BOULEVARD

City	State	Zip Code
WAUKESHA	WI	53186

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB30B.I22500

Amount of Each Disbursement this Period

1873.63
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2277.04
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 86 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. CHRISTOPHER MARTIN**

Mailing Address 100 CORRINA BOULEVARD

City  
WAUKESHAState  
WIZip Code  
53186Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB30B.I22501

Amount of Each Disbursement this Period

23.40
-------

Full Name (Last, First, Middle Initial)

**B. MILEAGE**

Mailing Address

City

State

Zip Code

Purpose of Disbursement  
MILEAGE EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB30B.I22569

Amount of Each Disbursement this Period

23.40
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. SCOTT POOLE**

Mailing Address 1528 SELLERY STREET

City  
MIDDLETONState  
WIZip Code  
53562Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB30B.I22530

Amount of Each Disbursement this Period

353.31
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

376.71
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 87 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JASON RECTOR**

Mailing Address 1902 40TH AVENUE

City	State	Zip Code
OSCEOLA	WI	54020

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB30B.I22510

Amount of Each Disbursement this Period

1236.69
---------

Full Name (Last, First, Middle Initial)

**B. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City	State	Zip Code
MAYLENE	AL	35114

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB30B.I22507

Amount of Each Disbursement this Period

1315.48
---------

Full Name (Last, First, Middle Initial)

**C. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City	State	Zip Code
MAYLENE	AL	35114

Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SB30B.I22508

Amount of Each Disbursement this Period

29.70
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2581.87
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 88 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SB30B.I22568

Amount of Each Disbursement this Period

29.70
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CARL STOLTE**

Mailing Address 3519 ROMA LANE

City State Zip Code  
MIDDLETON WI 53562Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SB30B.I22498

Amount of Each Disbursement this Period

193.51
--------

Full Name (Last, First, Middle Initial)

**C. JOSHUA WILSON**

Mailing Address 641 W. MAIN STREET

City State Zip Code  
MADISON WI 53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SB30B.I22514

Amount of Each Disbursement this Period

363.56
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

557.07
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I22542

Purpose of Disbursement  
PAYROLL TAX

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

6284.62

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I22543

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

36.29

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I22544

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

10.83

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6331.74

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 90 OF 116

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Category/  
Type

Transaction ID : SB30B.I22545

Amount of Each Disbursement this Period

73.48
-------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Category/  
Type

Transaction ID : SB30B.I22546

Amount of Each Disbursement this Period

79.00
-------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

152.48
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48638.12
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**SCHEDULE H1 (FEC Form 3X)****METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Transaction ID : MCW101915

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

\_\_\_\_\_ Presidential-Only Election Year (28% Federal)

☒ Presidential and Senate Election Year (36% Federal)

\_\_\_\_\_ Senate-Only Election Year (21% Federal)

\_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐  
**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %Nonfederal .....  %

This ratio applies to (check all that apply):

Administrative ☐      Generic Voter Drive ☐      Public Communications Referencing Party Only ☐

# **SCHEDULE H3 (FEC Form 3X)** **TRANSFERS FROM NONFEDERAL ACCOUNTS FOR** **ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 92 OF 116

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
 09 / 01 / 2015

TOTAL AMOUNT TRANSFERRED

9631.36

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

9631.36

Transaction ID : MCW0915ZZ

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 93 OF 116

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2015

TOTAL AMOUNT TRANSFERRED

15915.57

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

15915.57

Transaction ID : MCW0915ZY

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 94 OF 116

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2015

TOTAL AMOUNT TRANSFERRED

1338.26

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1338.26

Transaction ID : MCW0915ZX

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 95 OF 116

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2015

TOTAL AMOUNT TRANSFERRED

5060.71

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

5060.71

Transaction ID : MCW0915ZW

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 96 OF 116

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y  
 09 / 11 / 2015

TOTAL AMOUNT TRANSFERRED

2312.15

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

2312.15

Transaction ID : MCW0915ZU

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....



**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 97 OF 116

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2015

TOTAL AMOUNT TRANSFERRED

4838.28

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

4838.28

Transaction ID : MCW0915ZT

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 98 OF 116

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y Y  
 09 / 18 / 2015

TOTAL AMOUNT TRANSFERRED

4480.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

4480.00

Transaction ID : MCW0915ZS

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 99 OF 116

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
 ACCOUNT

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 09 / 23 / 2015

TOTAL AMOUNT TRANSFERRED

1705.43

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1705.43

Transaction ID : MCW0915ZR

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 100 OF 116

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

NAME OF ACCOUNT

REPUBLICAN PARTY OF WISCONSIN - STATE  
ACCOUNT

DATE OF RECEIPT

MM / DD / YYYY  
09 / 24 / 2015

TOTAL AMOUNT TRANSFERRED

3527.68

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

3527.68

Transaction ID : MCW0915ZM

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

48809.44

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred).....

48809.44

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 101 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>CAPITAL REMEDIATION</b>		<b>Transaction ID : 091815A</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6330 COPPS AVENUE					
City MONONA	State WI	Zip Code 53716			
Purpose of Disbursement: BUILDING MAINTENANCE		Category/ Type		Allocated Activity or Event Year-To-Date 150398.28	
Activity or Event Identifier:				Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
5417.64			9631.36		15049.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>BENJAMIN PLUMBING INC</b>		<b>Transaction ID : 091815B</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5396 KING JAMES WAY					
City MADISON	State WI	Zip Code 53719			
Purpose of Disbursement: BUILDING MAINTENANCE		Category/ Type		Allocated Activity or Event Year-To-Date 150511.57	
Activity or Event Identifier:				Date <input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
40.78			72.51		113.29

<b>C. Full Name (Last, First, Middle Initial)</b> <b>BK-DSI LLC</b>		<b>Transaction ID : 091815C</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 405 DORAL COURT					
City WAUNAKEE	State WI	Zip Code 53597			
Purpose of Disbursement: DATA MAINTENANCE		Category/ Type		Allocated Activity or Event Year-To-Date 152011.57	
Activity or Event Identifier:				Date <input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
540.00			960.00		1500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5998.42		10663.87		16662.29

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 102 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>CITY TREASURER</b>		<b>Transaction ID : 091815D</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 2997					
City MADISON	State WI	Zip Code 53701			
Purpose of Disbursement: UTILITIES				Allocated Activity or Event Year-To-Date 152125.06	
Activity or Event Identifier:		Category/ Type		Date 09 / 02 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
40.86			72.63		113.49

<b>B. Full Name (Last, First, Middle Initial)</b> <b>FEDEX</b>		<b>Transaction ID : 091815E</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 94515					
City PALATINE	State IL	Zip Code 60094			
Purpose of Disbursement: SHIPPING EXPENSE				Allocated Activity or Event Year-To-Date 152323.74	
Activity or Event Identifier:		Category/ Type		Date 09 / 02 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
71.52			127.16		198.68

<b>C. Full Name (Last, First, Middle Initial)</b> <b>HALVERSON'S BASEMENT REPAIR</b>		<b>Transaction ID : 091815F</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 32939 LOGAN ROAD					
City LONE ROCK	State WI	Zip Code 53556			
Purpose of Disbursement: BUILDING MAINTENANCE				Allocated Activity or Event Year-To-Date 154673.74	
Activity or Event Identifier:		Category/ Type		Date 09 / 02 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
846.00			1504.00		2350.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
958.38		1703.79		2662.17

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 103 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>KONICA MINOLTA PREMIER FINANCE</b>			<b>Transaction ID : 091815G</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 740423								
City ATLANTA		State GA		Zip Code 30374				
Purpose of Disbursement: COPIER LEASE				Category/ Type		Allocated Activity or Event Year-To-Date 156107.02		
Activity or Event Identifier:						Date <input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
515.98				917.30				1433.28

<b>B. Full Name (Last, First, Middle Initial)</b> <b>MG&amp;E</b>			<b>Transaction ID : 091815H</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 1231								
City MADISON		State WI		Zip Code 53701				
Purpose of Disbursement: UTILITIES				Category/ Type		Allocated Activity or Event Year-To-Date 157382.49		
Activity or Event Identifier:						Date <input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
459.17				816.30				1275.47

<b>C. Full Name (Last, First, Middle Initial)</b> <b>SECURITY LUEBKE ROOFING INC</b>			<b>Transaction ID : 091815I</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2251 PROGRESS WAY								
City KAUKAUNA		State WI		Zip Code 54130				
Purpose of Disbursement: OFFICE MAINTENANCE				Category/ Type		Allocated Activity or Event Year-To-Date 173382.49		
Activity or Event Identifier:						Date <input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
5760.00				10240.00				16000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6735.15		11973.60		18708.75

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 104 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>TDS METROCOM</b>		<b>Transaction ID : 091815J</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 94510					
City PALATINE	State IL	Zip Code 60094			
Purpose of Disbursement: OFFICE PHONES				Allocated Activity or Event Year-To-Date 173723.51	
Activity or Event Identifier:		Category/ Type		Date 09 / 02 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
122.77			218.25		341.02

<b>B. Full Name (Last, First, Middle Initial)</b> <b>TDS METROCOM</b>		<b>Transaction ID : 091815K</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 94510					
City PALATINE	State IL	Zip Code 60094			
Purpose of Disbursement: OFFICE PHONES				Allocated Activity or Event Year-To-Date 175266.36	
Activity or Event Identifier:		Category/ Type		Date 09 / 02 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
555.43			987.42		1542.85

<b>C. Full Name (Last, First, Middle Initial)</b> <b>BMO HARRIS BANK</b>		<b>Transaction ID : 091815L</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 3052					
City MILWAUKEE	State WI	Zip Code 53201			
Purpose of Disbursement: CREDIT CARD PAYMENT				Allocated Activity or Event Year-To-Date 177357.40	
Activity or Event Identifier:		Category/ Type		Date 09 / 04 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
752.77			1338.27		2091.04

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1430.97		2543.94		3974.91

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 105 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>ADVANCED DISPOSAL</b>		<b>Transaction ID : 091815M</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 74008053					
City CHICAGO	State IL	Zip Code 60674			
Purpose of Disbursement: WASTE REMOVAL				Allocated Activity or Event Year-To-Date 177585.57	
Activity or Event Identifier:		Category/ Type		Date 09 / 10 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
82.14			146.03		228.17

<b>B. Full Name (Last, First, Middle Initial)</b> <b>IMPACT ACQUISITIONS LLC</b>		<b>Transaction ID : 091815N</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 75 REMITTANCE DRIVE					
City CHICAGO	State IL	Zip Code 60675			
Purpose of Disbursement: COPIER LEASE				Allocated Activity or Event Year-To-Date 181248.51	
Activity or Event Identifier:		Category/ Type		Date 09 / 10 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1318.66			2344.28		3662.94

<b>C. Full Name (Last, First, Middle Initial)</b> <b>SECURITY LUEBKE ROOFING INC</b>		<b>Transaction ID : 091815O</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2251 PROGRESS WAY					
City KAUKAUNA	State WI	Zip Code 54130			
Purpose of Disbursement: BUILDING MAINTENANCE				Allocated Activity or Event Year-To-Date 185264.76	
Activity or Event Identifier:		Category/ Type		Date 09 / 10 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1445.85			2570.40		4016.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2846.65		5060.71		7907.36

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 106 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>EASY PERMIT POSTAGE PITNEY BOWES</b>		<b>Transaction ID : 091815P</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 371874					
City PITTSBURGH	State PA	Zip Code 15250			
Purpose of Disbursement: POSTAGE FOR METER				Allocated Activity or Event Year-To-Date 188443.50	
Activity or Event Identifier:		Category/ Type		Date 09 / 11 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1144.35			2034.39		3178.74

<b>B. Full Name (Last, First, Middle Initial)</b> <b>LEXISNEXIS</b>		<b>Transaction ID : 091815Q</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 2314					
City CAROL STREAM	State IL	Zip Code 60132			
Purpose of Disbursement: SUBSCRIPTION				Allocated Activity or Event Year-To-Date 188822.50	
Activity or Event Identifier:		Category/ Type		Date 09 / 11 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
136.44			242.56		379.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>ORKIN EXTERMINATING</b>		<b>Transaction ID : 091815R</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 6218					
City MADISON	State WI	Zip Code 53716			
Purpose of Disbursement: EXTERMINATION				Allocated Activity or Event Year-To-Date 188877.50	
Activity or Event Identifier:		Category/ Type		Date 09 / 11 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
19.80			35.20		55.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1300.59		2312.15		3612.74

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 107 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>DAN MORSE CONSULTING LLC</b>			<b>Transaction ID : 091815S</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5205 BARTON ROAD								
City MADISON		State WI		Zip Code 53711				
Purpose of Disbursement: FUNDRAISING CONSULTING				Category/ Type		Allocated Activity or Event Year-To-Date 195877.50		
Activity or Event Identifier:						Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
2520.00				4480.00				7000.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>ASPECT CONSULTING LLC</b>			<b>Transaction ID : 091815T</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8401 EXCELSIOR DRIVE								
City MADISON		State WI		Zip Code 53717				
Purpose of Disbursement: COMPLIANCE CONSULTING				Category/ Type		Allocated Activity or Event Year-To-Date 201877.50		
Activity or Event Identifier:						Date <input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
2160.00				3840.00				6000.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>CENTURY SPRINGS BOTTLING CO</b>			<b>Transaction ID : 091815U</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 856858								
City MINNEAPOLIS		State MN		Zip Code 55485				
Purpose of Disbursement: OFFICE WATER				Category/ Type		Allocated Activity or Event Year-To-Date 201953.00		
Activity or Event Identifier:						Date <input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>		
FEDERAL SHARE		+		NONFEDERAL SHARE		=		TOTAL AMOUNT
27.18				48.32				75.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4707.18		8368.32		13075.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 108 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>FLS CONNECT</b>		<b>Transaction ID : 091815V</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7300 HUDSON BOULEVARD, STE 270					
City ST PAUL	State MN	Zip Code 55128			
Purpose of Disbursement: CONFERENCE CALLS				Allocated Activity or Event Year-To-Date 201979.74	
Activity or Event Identifier:			Category/ Type	Date 09 / 17 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.63			17.11		26.74

<b>B. Full Name (Last, First, Middle Initial)</b> <b>LIND WEININGER LLC</b>		<b>Transaction ID : 091815W</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8020 EXCELSIOR DRIVE					
City MADISON	State WI	Zip Code 53717			
Purpose of Disbursement: LEGAL SERVICES				Allocated Activity or Event Year-To-Date 202979.74	
Activity or Event Identifier:			Category/ Type	Date 09 / 17 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.00			640.00		1000.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>PERSONNEL CONCEPTS</b>		<b>Transaction ID : 091815X</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 5750					
City CAROL STREAM	State IL	Zip Code 60197			
Purpose of Disbursement: ACCOUNTING SERVICES				Allocated Activity or Event Year-To-Date 203437.32	
Activity or Event Identifier:			Category/ Type	Date 09 / 17 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
164.73			292.85		457.58

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
534.36		949.96		1484.32

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 109 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>BADGERLAND CHEMICAL &amp; SUPPLY</b>		<b>Transaction ID : 091815Y</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 620303				
City MIDDLETON	State WI	Zip Code 53562		
Purpose of Disbursement: CUSTODIAL SUPPLIES			Allocated Activity or Event Year-To-Date 203613.22	
Activity or Event Identifier:		Category/ Type	Date 09 / 23 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	
63.32			112.58	
		=	TOTAL AMOUNT	
			175.90	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>CHARTER</b>		<b>Transaction ID : 091815Z</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 2981				
City MILWAUKEE	State WI	Zip Code 53201		
Purpose of Disbursement: CABLE			Allocated Activity or Event Year-To-Date 203740.00	
Activity or Event Identifier:		Category/ Type	Date 09 / 23 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	
45.64			81.14	
		=	TOTAL AMOUNT	
			126.78	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>CITY TREASURER</b>		<b>Transaction ID : 091815AA</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 2997				
City MADISON	State WI	Zip Code 53701		
Purpose of Disbursement: UTILITIES			Allocated Activity or Event Year-To-Date 203833.15	
Activity or Event Identifier:		Category/ Type	Date 09 / 23 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE	
33.53			59.62	
		=	TOTAL AMOUNT	
			93.15	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.49		253.34		395.83

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 110 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>MG&amp;E</b>		<b>Transaction ID : 091815AB</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 1231					
City MADISON	State WI	Zip Code 53701			
Purpose of Disbursement: UTILITIES		Category/ Type		Allocated Activity or Event Year-To-Date 205017.33	
Activity or Event Identifier:				Date <input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
426.30			757.88		1184.18

<b>B. Full Name (Last, First, Middle Initial)</b> <b>READY REFRESH BY NESTLE</b>		<b>Transaction ID : 091815AC</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 856680					
City LOUISVILLE	State KY	Zip Code 40285			
Purpose of Disbursement: OFFICE WATER		Category/ Type		Allocated Activity or Event Year-To-Date 205040.33	
Activity or Event Identifier:				Date <input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
8.28			14.72		23.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>TDS</b>		<b>Transaction ID : 091815AD</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 94510					
City PALATINE	State IL	Zip Code 60094			
Purpose of Disbursement: OFFICE PHONES		Category/ Type		Allocated Activity or Event Year-To-Date 205386.61	
Activity or Event Identifier:				Date <input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2015"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
124.66			221.62		346.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
559.24		994.22		1553.46

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 111 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>TDS</b>		<b>Transaction ID : 091815AE</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 94510					
City PALATINE	State IL	Zip Code 60094			
Purpose of Disbursement: OFFICE PHONES				Allocated Activity or Event Year-To-Date 206102.05	
Activity or Event Identifier:		Category/ Type		Date 09 / 23 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
257.56			457.88		715.44

<b>B. Full Name (Last, First, Middle Initial)</b> <b>BK-DSI LLC</b>		<b>Transaction ID : 091815AF</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 405 DORAL COURT					
City WAUNAKEE	State WI	Zip Code 53597			
Purpose of Disbursement: DATA MAINTENANCE				Allocated Activity or Event Year-To-Date 211614.05	
Activity or Event Identifier:		Category/ Type		Date 09 / 24 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1984.32			3527.68		5512.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>OFFICE DEPOT</b>		<b>Transaction ID : 091815AG</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 515 KEHOE BOULEVARD					
City CAROL STREAM	State IL	Zip Code 60188			
Purpose of Disbursement: OFFICE SUPPLIES				Allocated Activity or Event Year-To-Date 194.08	
Activity or Event Identifier:		Category/ Type		Date 07 / 09 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
69.87			124.21		194.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2241.88		3985.56		6227.44

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 112 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>VERTICAL RESPONSE</b>		<b>Transaction ID : 091815AH</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 50 BEALE STREET					
City SAN FRANCISCO	State CA	Zip Code 94105			
Purpose of Disbursement: WEBSITE MAINTENANCE		<div></div> Category/ Type		Allocated Activity or Event Year-To-Date <div></div> 15.53	
Activity or Event Identifier:				Date <div>MM</div> 07 / <div>DD</div> 12 / <div>YYYYYY</div> 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div></div> 5.59			<div></div> 9.94		<div></div> 15.53

<b>B. Full Name (Last, First, Middle Initial)</b> <b>VERTICAL RESPONSE</b>		<b>Transaction ID : 091815AI</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 50 BEALE STREET					
City SAN FRANCISCO	State CA	Zip Code 94105			
Purpose of Disbursement: WEBSITE MAINTENANCE		<div></div> Category/ Type		Allocated Activity or Event Year-To-Date <div></div> 499.00	
Activity or Event Identifier:				Date <div>MM</div> 07 / <div>DD</div> 12 / <div>YYYYYY</div> 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div></div> 179.64			<div></div> 319.36		<div></div> 499.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>ADOBE CREATIVE CLOUD</b>		<b>Transaction ID : 091815AJ</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 345 PARK AVENUE					
City SAN JOSE	State CA	Zip Code 95110			
Purpose of Disbursement: SOFTWARE SUBSCRIPTION		<div></div> Category/ Type		Allocated Activity or Event Year-To-Date <div></div> 52.74	
Activity or Event Identifier:				Date <div>MM</div> 07 / <div>DD</div> 16 / <div>YYYYYY</div> 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div></div> 18.99			<div></div> 33.75		<div></div> 52.74

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div></div> 0.00		<div></div> 0.00		<div></div> 0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<div></div>	<div></div>	<div></div>



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 113 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>AMAZON</b>		<b>Transaction ID : 091815AK</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 410 TERRY AVENUE N					
City SEATTLE	State WA	Zip Code 98109			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type		Allocated Activity or Event Year-To-Date 16.68	
Activity or Event Identifier:				Date MM / DD / YYYY 07 / 16 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
6.00			10.68		16.68

<b>B. Full Name (Last, First, Middle Initial)</b> <b>AMAZON</b>		<b>Transaction ID : 091815AL</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 410 TERRY AVENUE N					
City SEATTLE	State WA	Zip Code 98109			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type		Allocated Activity or Event Year-To-Date 10.50	
Activity or Event Identifier:				Date MM / DD / YYYY 07 / 23 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
3.78			6.72		10.50

<b>C. Full Name (Last, First, Middle Initial)</b> <b>OFFICE DEPOT</b>		<b>Transaction ID : 091815AM</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 13770 W MAPLE ROAD					
City OMAHA	State NE	Zip Code 68164			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type		Allocated Activity or Event Year-To-Date 167.20	
Activity or Event Identifier:				Date MM / DD / YYYY 07 / 23 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
60.19			107.01		167.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 114 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>AMAZON</b>		<b>Transaction ID : 091815AN</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 410 TERRY AVENUE N					
City SEATTLE	State WA	Zip Code 98109			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type		Allocated Activity or Event Year-To-Date 135.54	
Activity or Event Identifier:				Date MM / DD / YYYY 07 / 28 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
48.79			86.75		135.54

<b>B. Full Name (Last, First, Middle Initial)</b> <b>OFFICE MAX</b>		<b>Transaction ID : 091815AO</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 13770 W MAPLE ROAD					
City OMAHA	State NE	Zip Code 68164			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type		Allocated Activity or Event Year-To-Date 38.98	
Activity or Event Identifier:				Date MM / DD / YYYY 07 / 28 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
14.03			24.95		38.98

<b>C. Full Name (Last, First, Middle Initial)</b> <b>HOME DEPOT</b>		<b>Transaction ID : 091815AP</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2425 E SPRINGS DRIVE					
City MADISON	State WI	Zip Code 53704			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type		Allocated Activity or Event Year-To-Date 62.25	
Activity or Event Identifier:				Date MM / DD / YYYY 07 / 28 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
22.41			39.84		62.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 115 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>MICROSOFT</b>		<b>Transaction ID : 091815AQ</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1 MICROSOFT WAY					
City REDMOND	State WA	Zip Code 98052			
Purpose of Disbursement: SOFTWARE SUBSCRIPTION		Category/ Type		Allocated Activity or Event Year-To-Date 155.20	
Activity or Event Identifier:				Date MM / DD / YYYY 07 / 31 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
55.87			99.33		155.20

<b>B. Full Name (Last, First, Middle Initial)</b> <b>FEDEX</b>		<b>Transaction ID : 091815AR</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 654 W WASHINGTON AVENUE					
City MADISON	State WI	Zip Code 53703			
Purpose of Disbursement: SHIPPING EXPENSE		Category/ Type		Allocated Activity or Event Year-To-Date 80.44	
Activity or Event Identifier:				Date MM / DD / YYYY 08 / 05 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
28.96			51.48		80.44

<b>C. Full Name (Last, First, Middle Initial)</b> <b>VERTICAL RESPONSE</b>		<b>Transaction ID : 091815AS</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 50 BEALE STREET					
City SAN FRANCISCO	State CA	Zip Code 94105			
Purpose of Disbursement: WEBSITE MAINTENANCE		Category/ Type		Allocated Activity or Event Year-To-Date 653.42	
Activity or Event Identifier:				Date MM / DD / YYYY 08 / 06 / 2015	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
235.23			418.19		653.42

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 116 OF 116

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>AMAZON</b>		<b>Transaction ID : 091815AT</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 410 TERRY AVENUE N					
City SEATTLE	State WA	Zip Code 98109			
Purpose of Disbursement: OFFICE SUPPLIES		Category/ Type		Allocated Activity or Event Year-To-Date 9.48	
Activity or Event Identifier:				Date <input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2015"/>	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
3.41			6.07		9.48

<b>B. Full Name (Last, First, Middle Initial)</b>				Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address					
City	State	Zip Code			
Purpose of Disbursement:		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date <input type="text"/> / <input type="text"/> / <input type="text"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT

<b>C. Full Name (Last, First, Middle Initial)</b>				Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address					
City	State	Zip Code			
Purpose of Disbursement:		Category/ Type		Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:				Date <input type="text"/> / <input type="text"/> / <input type="text"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
27455.31	48809.46	76264.77